

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

DELAWARE COUNTY REPUBLICAN CENTRAL COMMITTEE

IMPORTANT: Indicate by # type of committee you are reporting for: 4

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name _____ Political Party (if applicable) _____

Office Sought _____ District (if Senate or House) _____

FORM

DR-2

(Rev. 12/2005)

DISCLOSURE
REPORT

Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

File with:

Iowa Ethics and Campaign

Disclosure Board

510 E. 12th, Ste. 1A

Des Moines, Iowa 50319

Fax: 515-281-3701

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Deborah L. Peyton
SIGNATURE OF PERSON FILING REPORT

(563) 927-4194
TELEPHONE

1/19/10
DATE SIGNED

I AM FILING A 1/19/10 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

(report date)

Indicate by # 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

3,778.32

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

5,335.11

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 9,113.43

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

2,092.53

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$

\$ 7,020.90

**UNPAID BILLS (From Schedule D - Attach Schedule D)

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
DELAWARE COUNTY REPUBLICAN CENTRAL COMM.

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
1/13/09	ID# CK#	FARMERS & MERCHANTS SAV BK. 101 E. MAIN ST. MANCHESTER, IA. 52057		\$ 1.23	<input type="checkbox"/>
2/10/09	ID# CK#	↓		.87	<input type="checkbox"/>
3/10/09	ID# CK#			.87	<input type="checkbox"/>
4/14/09	ID# CK#			1.09	<input type="checkbox"/>
5/12/09	ID# CK#			.87	<input type="checkbox"/>
6/9/09	ID# CK#			.81	<input type="checkbox"/>
7/14/09	ID# CK#			.99	<input type="checkbox"/>
8/11/09	ID# CK#			.77	<input type="checkbox"/>
9/8/09	ID# CK#			.75	<input type="checkbox"/>
10/13/09	ID# CK#			1.60	<input type="checkbox"/>

SUB-TOTAL

\$ 9.85
\$

TOTAL (if last page of this schedule)

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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11/11/09	ID# CK#	FARMERS & MERCHANTS SAV BK. 101 E. MAIN ST. MANCHESTER, IA. 52057		\$ 1.67	<input type="checkbox"/>
12/8/09	ID# CK#	↓		1.56	<input type="checkbox"/>
9/19/09	ID# CK#	MISC. RECEIPTS		180.00	<input checked="" type="checkbox"/>
	ID# CK#	SHIRLEY HELMRICHS 1933 255th ST. MANCHESTER, IA. 52057		85.00	<input checked="" type="checkbox"/>
	ID# CK#	MISC. RECEIPTS		453.00	<input checked="" type="checkbox"/>
	ID# CK#	↓		15.00	<input checked="" type="checkbox"/>
	ID# CK#	DEB PEYTON 204 E. UNION ST. MANCHESTER, IA. 52057		24.00	<input checked="" type="checkbox"/>
	ID# CK#	MARCIA INTORF 307 GAY STREET DELMH, IA. 52223		8.00	<input checked="" type="checkbox"/>
	ID# CK#	CAROLY WILSON 1847 HONEY CREEK ROAD MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
↓	ID# CK#	JAMES CLIFTON P.O. BOX 306 EARLVILLE, IA. 52041-0306		125.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 993.23	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

DELAWARE COUNTY REPUBLICAN CENTRAL COMM.

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9/19/09	ID# CK#	SHIRLEY HELMRICH 1933 255 th STREET MANCHESTER, IA. 52057		\$ 110.00	<input checked="" type="checkbox"/>
	ID# CK#	LARRY SHOVER 2375 OMEGA ROAD DELHI, IA. 52223		110.00	<input checked="" type="checkbox"/>
	ID# CK#	BRAD KIMMERLE 1575 130 th AVE DUNDEE, IA. 52038-		100.00	<input checked="" type="checkbox"/>
	ID# CK#	WESLEY RUNYAN 16300 189 th ST. MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
	ID# CK#	CLIFFORD BUNYING 1002 NEW STREET MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
	ID# CK#	JOAN SHEPPARD 200 MCCARREN DR. MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
	ID# CK#	MAX ANDREWS 1408 EARLY STAGE COACH RD. MANCHESTER, IA. 52057		200.00	<input checked="" type="checkbox"/>
	ID# CK#	DAVE TRACEY 1111 GALES AVE MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
	ID# CK#	WILL LUX 101 RAYS COURT MANCHESTER, IA.		100.00	<input checked="" type="checkbox"/>
	ID# CK#	CHUCK CLAYTON 301 CHURCH STREET COLESBURG, IA. 52035		200.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$1,220.00

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

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Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DELAWARE COUNTY REPUBLICAN CENTRAL COMM.

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9/19/09	ID# CK#	JANEY HOLDEN 132 EVANS MANCHESTER, IA. 52057		\$ 100.00	<input checked="" type="checkbox"/>
	ID# CK#	DEAN JONES 818 E. UNION ST. MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
	ID# CK#	MARCHETA COOEY 2607 220TH AVENUE DELHI, IA. 52223		100.00	<input checked="" type="checkbox"/>
	ID# CK#	JEFF MADLON 713 E. HOWARD ST. MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
	ID# CK#	DEB PEYTON 204 E. UNION ST. MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
	ID# CK#	JOHN TYRRELL 401 N. FRANKLIN ST. MANCHESTER, IA. 52057		90.00	<input checked="" type="checkbox"/>
	ID# CK#	DORAN ZUMBACH 3278 110TH AVENUE COGGON, IA. 52218		250.00	<input checked="" type="checkbox"/>
	ID# CK#	MARSHA NEECHER 119 S. CENTER ST. DUNDEE, IA. 52038		50.00	<input checked="" type="checkbox"/>
	ID# CK#	R.E. CLARK 200 MCCARREN DRIVE MANCHESTER, IA. 52057		50.00	<input checked="" type="checkbox"/>
	ID# CK#	JEFF ZUMBACH 2733 170TH AVE. MANCHESTER, IA. 52057		50.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 990.00

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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9/19/09	ID# CK#	GERALD WILTSE 316 ANDERSON STREET MANCHESTER, IA.		\$ 50.00	<input checked="" type="checkbox"/>
	ID# CK#	MARCEL KIELKUCNI 109 KEENAN COURT MANCHESTER, IA. 52057		35.00	<input checked="" type="checkbox"/>
	ID# CK#	EVERETT SCHULMAN 709 CHARLOTTE ST. EARLVILLE, IA. 52041		25.00	<input checked="" type="checkbox"/>
	ID# CK#	FRANK MEAD 2328 245th ST. DELHI, IA. 52223		20.00	<input checked="" type="checkbox"/>
	ID# CK#	JUDY ELLINGSON 501 E. HOWARD ST. MANCHESTER, IA. 52057		5.00	<input checked="" type="checkbox"/>
	ID# CK#	MISC. RECEIPTS		465.00	<input checked="" type="checkbox"/>
	ID# CK#	TERRY GRIFFITH 2142 210th STREET MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
	ID# CK#	CARLA BECKER 901 SHERMAN AVENUE MANCHESTER, IA. 52057		80.00	<input checked="" type="checkbox"/>
	ID# CK#	JAMES McDONALD 2870 21st AVENUE DELHI, IA. 52223		20.00	<input checked="" type="checkbox"/>
	ID# CK#	CHARLES ANKROM 2275 110th AVE. MASONVILLE, IA. 50654		40.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 840.00

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DELAWARE COUNTY REPUBLICAN CENTRAL COMM.

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9/19/09	ID# CK#	PAUL VOGTLIN 905 N. FRANKLIN ST. MANCHESTER, IA. 52057		\$ 60.00	<input checked="" type="checkbox"/>
	ID# CK#	DOUG ROBBINS 144 CLARA AVENUE MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
	ID# CK#	CHERYL WALSER-KRAMER 2537 WINDSOR AVE DUBUQUE, IA. 52004		20.00	<input checked="" type="checkbox"/>
	ID# CK#	JILL GOOS 1212 N. 5TH ST. MANCHESTER, IA. 52057		10.00	<input checked="" type="checkbox"/>
	ID# CK#	DAVE KRONLAGE 3240 210TH ST. DUYERSVILLE, IA. 52040-8761		20.00	<input checked="" type="checkbox"/>
	ID# CK#	CHARLES STEGER 3313 ST. HWY 3 NEW VIENNA, IA. 52065		30.00	<input checked="" type="checkbox"/>
	ID# CK#	MARSHA HELLE P.O. BOX 7 EARLVILLE, IA. 52041		20.00	<input checked="" type="checkbox"/>
	ID# CK#	MARCIA INTORF 307 GAY STREET MANCHESTER, IA. 52057		40.00	<input checked="" type="checkbox"/>
	ID# CK#	PAT BECKER 2403 150TH AVENUE MANCHESTER, IA. 52057		20.00	<input checked="" type="checkbox"/>
	ID# CK#	LOREN DIETRICH P.O. BOX 101 EARLVILLE, IA. 52041		20.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 340.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DELAWARE COUNTY REPUBLICAN CENTRAL COMM.

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9/19/09	ID# CK#	DAVID HUNT 2463 170 th ST. GREELEY, IA. 52050		\$ 20.00	<input checked="" type="checkbox"/>
	ID# CK#	DAVE SUNNE 1347 129 th ST. DUNDEE, IA. 52038		30.00	<input checked="" type="checkbox"/>
	ID# CK#	JULIE HACKBARTH 3016 115 th STREET COLESBURG, IA 52035		20.00	<input checked="" type="checkbox"/>
	ID# CK#	MARSHA MESCHER 119 S. CENTER ST. DUNDEE, IA. 52038		20.00	<input checked="" type="checkbox"/>
	ID# CK#	SCOTT LINGS 3384 CLEMENS RD NEW VIENNA, IA. 52065		20.00	<input checked="" type="checkbox"/>
	ID# CK#	LANCE SIMEINS 105 SUMMIT EARLVILLE, IA. 52041		20.00	<input checked="" type="checkbox"/>
	ID# CK#	DOUG ROBBINS 144 CLARA AVE MANCHESTER, IA. 52057		40.00	<input checked="" type="checkbox"/>
	ID# CK#	BRIAN COOK 201 SEELEY ST. MANCHESTER, IA. 52057		40.00	<input checked="" type="checkbox"/>
	ID# CK#	VAN ZUCH 941 N. FRANKLIN ST. MANCHESTER, IA. 52057		50.00	<input checked="" type="checkbox"/>
	ID# CK#	WM. LUX 101 RAYS COURT MANCHESTER, IA. 52057		10.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 270.00

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DELAWARE COUNTY REPUBLICAN CENTRAL COMAN

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9/19/09	ID# CK#	BRAD KIMMERLE 1575 130 th AVE DUNDEE, IA 52038-8512		\$ 60.00	<input checked="" type="checkbox"/>
	ID# CK#	DEB PEYTON 204 E. UNION ST. MANCHESTER, IA. 52057		20.00	<input checked="" type="checkbox"/>
	ID# CK#	RDN LONGMUIR 1101 SUNRISE DRIVE MANCHESTER, IA. 52057		40.00	<input checked="" type="checkbox"/>
	ID# CK#	BRUCE MOULTON 504 E. 3 rd ST. EARLVILLE, IA. 52041-9608		20.00	<input checked="" type="checkbox"/>
	ID# CK#	JAMES CLIFTON Box 306 EARLVILLE, IA. 52041		20.00	<input checked="" type="checkbox"/>
	ID# CK#	KENT WALTON P.O. Box 374 EARLVILLE, IA. 52041-0374		20.00	<input checked="" type="checkbox"/>
	ID# CK#	NATHAN FREEZE 2934 HIGHWAY 38 HOPKINSON, IA. 52237		80.00	<input checked="" type="checkbox"/>
	ID# CK#	DUANE TIEMENS 1848 19 th ST. MANCHESTER, IA. 52057		20.00	<input checked="" type="checkbox"/>
	ID# CK#	EVERETT SCHUMAN 709 CHARLOTTE ST. EARLVILLE, IA. 52041		10.00	<input checked="" type="checkbox"/>
↓	ID# CK#	REV. MERLYN FARRAND 508 N. FRANKLIN ST. MANCHESTER, IA. 52057		20.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 310.00

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

DELAWARE COUNTY REPUBLICAN CENTRAL COMM.

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/19/09	ID# CK#	TIM COLLIER 912 TANGLEWOOD DR. MANCHESTER, IA. 52057		\$ 20.00	<input checked="" type="checkbox"/>
↓	ID# CK#	MAX ANDREWS 1408 EARLY STAGECOACH RD. MANCHESTER, IA. 52057		20.00	<input checked="" type="checkbox"/>
10/11/09	ID# CK#	CHARLES ANKROM 2275 110th AVENUE MASONVILLE, IA. 50654		100.00	<input checked="" type="checkbox"/>
↓	ID# CK#	RICHARD RETZ 1351 207th ST. MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
↓	ID# CK#	LENZ COLLISION 981 E. MAIN ST. MANCHESTER, IA. 52057		20.00	<input checked="" type="checkbox"/>
12/10/09	ID# CK#	DUANE WERGER 300 SEELEY ST. MANCHESTER, IA. 52057		100.00	<input checked="" type="checkbox"/>
1/12/10	ID# CK#	FARMERS & MERCHANTS SAV. BN. 101 E. MAIN ST. MANCHESTER, IA. 52057		2.03	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 362.03

TOTAL (if last page of this schedule)

\$5,333.08

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B

(Rev. 07/03)

MONETARY
EXPENDITURESCHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

DELAWARE COUNTY REPUBLICAN CENTRAL COMM.

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/4/09	ID# CK# 1069	KARL GILBERTSON FUND 1609 RAINBOW DR. CEDAR FALLS, IA 50613	DONATION TO FUND RAISER	\$ 250.00
5/23/09	ID# CK# 1070	DELAWARE CO. FAIR FAIR GROUNDS MANCHESTER, IA 52057	FAIR BOOTH FEE	100.00
7/7/09	ID# CK# 1071	JEFF MADLON 713 E. HOWARD ST MANCHESTER, IA 52057	9/15 BLOG RENTAL REIMB.	100.00
8/20/09	ID# CK# 1072	PAUL VOGTLIN 905 N. FRANKLIN MANCHESTER, IA 52057	CANDY FOR PARADES	88.65
8/26/09	ID# CK# 1073	TERRY GRIFFITH 8142 210th STREET MANCHESTER, IA 52057	2010 CAUCUS RENTAL, POSTAGE, PRINTER COSTS, PARADE SUPPLIES	258.67
9/1/09	ID# CK# 1074	PAUL VOGTLIN 905 N. FRANKLIN MANCHESTER, IA 52057	ENVELOPES, FLIERS & POSTAGE FOR FUND RAISER	106.65
9/12/09	ID# CK# 1075	↓	AD IN SHOPPER FOR FUND RAISER	57.10
9/15/09	ID# CK# 1076	DAN GABLE 3035 HIGH BLUFF CT. CORALVILLE, IA 52241	SPEAKER FOR FUND RAISER	150.00
SUB-TOTAL				\$ 1,111.07
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B

(Rev. 07/03)

MONETARY
EXPENDITURES
☐ CHECK THIS BOX IF
AMENDING FORM
COMMITTEE NAME (Must be same as on Statement of Organization)

DELAWARE COUNTY REPUBLICAN CENTRAL COMM.

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/19/09	ID# CK# 1077	JEFF MADLOM 713 E. HOWARD ST. MANCHESTER, IA 52057	GAS FOR BALLOONS	\$ 48.10
↓	ID# CK# 1078	DELAWARE CO. GRILL TEAM 70 S. HELM RICHES MANCHESTER, IA 52057	COOK MEAT FOR FUND RAISER	100.00
↓	ID# CK# 1079	DELAWARE CO. FAIR FAIR GROUND MANCHESTER, IA 52057	REMAINDER BUILDING RENTAL	150.00
9/21/09	ID# CK# 1080	PAUL VOGTLIN 905 N. FRANKLIN MANCHESTER, IA 52057	FUND RAISER FOOD	421.16
↓	ID# CK# 1081	CARLA BECKER 901 SHERMAN AVE. MANCHESTER, IA 52057	↓	47.52
↓	ID# CK# 1082	MARCIA INTORF 307 GAY STREET DELHI, IA 52223	FUND RAISER DECORATIONS	114.68
12/8/09	ID# CK# 1083	DELAWARE CO. AUDITOR 301 E. MAIN ST. MANCHESTER, IA 52057	2 - REPUBLICAN VOTER LISTS	10.00
1/5/10	ID# CK# 1084	TERRY GRIFFITH 2142 210th STREET MANCHESTER, IA 52057	2 - PRESS ADS FOR CAUCUS	90.00
SUB-TOTAL				\$ 981.46
TOTAL (if last page of this schedule)				\$ 2,092.53

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)